# **Workforce and Employment Committee**

Meeting Minutes June 14, 2023

**Committee Members present:** Vera Calloway – Chairperson, Walter Shwe, Deborah Pitts, Arden Tucker, Dale Mueller, Cindy Wang, Jessica Grove

**WET Steering Committee Members Present:** Janet Frank, Olivia Loewy, Chad Costello, Marcellus Brookshaw

**Presenters**: Michael Andrijich, Clinton Ramstad, Lucero Robles, Alexandria Simpson, Reena De Asis, Joe Altepeter

Staff present: Ashneek Nanua, Justin Boese, Jenny Bayardo

Meeting Commenced at 1:30 p.m.

Item #1 Approve April 2023 Draft Meeting Minutes

The Workforce and Employment Committee (WEC) reviewed the April 2023 Draft Meeting Minutes. The minutes were approved by the committee with no edits.

#### Action/Resolution

The April 2023 WEC Meeting Minutes are approved.

# **Responsible for Action-Due Date**

The April 2023 WEC Meeting Minutes will be posted to the CBHPC website.

# Item #2 CBHPC Workgroups Update

Vera Calloway, Chairperson, stated that there are now three CBHPC workgroups: Reducing Disparities, Children and Youth, and Substance Use Disorders. Vera is the representative for the Reducing Disparities Workgroup. Christine Frey, who is currently on leave, is a representative for the Children and Youth Workgroup, and there is a need for a representative in the interim. Vera encouraged committee members to reach out to her if they are interested to serve on and represent the Substance Use Disorder Workgroup (SUD) and Children and Youth Workgroup. Deborah Pitts indicated that she would attend the SUD workgroup meeting before deciding if she would like to act as a representative of that workgroup.

WEC staff, Ashneek Nanua, provided an update on the June 2023 Children and Youth Workgroup meeting. The workgroup identified three key priorities: 1) identifying, learning, and sharing best practices 2) increasing the youth voice on the workgroup and 3) identifying and proposing specific legislation around children and youth. The workgroup will invite Allcove, a Stanford program, and Scout, a Sutter Health program, to present on the physical and digital children and youth platforms for the October Quarterly Meeting. During this meeting, the workgroup will begin to identify what youth would like to see in the public behavioral health system and structure the three goals based on what the youth report to the workgroup.

Jenny Bayardo, CBHPC Executive Officer, provided an update on the April 2023 SUD workgroup meeting. She indicated that members discussed what they hope to accomplish in the workgroup. For the June 2023 meeting, the workgroup will have a discussion with Captain Emily from the Substance Abuse and Mental Health Services Administration (SAMHSA), about the work she does at the federal level for SUD and discuss how to better integrate SUD into the Council. This may include potential presentations and activities for committees. Javier Moreno is the lead of the workgroup.

Vera Calloway reported that the Reducing Disparities Workgroup received interesting input from members and the community. She indicated that the workgroup plans to screen a film recommended by one of the workgroup members.

Deborah Pitts recommended there be a WEC goal tied to each workgroup. Vera Calloway added that peers will play and already are playing an important role in the workgroups and future policies.

#### Action/Resolution

The workgroup representatives will update the WEC on activities of each group.

# **Responsible for Action-Due Date**

Vera Calloway, Ashneek Nanua - Ongoing

Item #3 2020-2025 Workforce Education and Training (WET) Five-Year Plan and HCAI Behavioral Health Updates

Michael Andrijich and Clinton Ramstad from the Grants Management Section of the Health Care Workforce Development Division at the Department of Health Care Access and Information (HCAI), presented updates on the HCAI behavioral health workforce programs and WET Five-Year Plan. HCAI is in the beginning stages of developing the next WET Five-Year Plan and will be putting together workgroups to evaluate how the current Five-Year Plan is working or not working and address any concerns for the next plan as there were obstacles in the previous plan.

Michael Andrijich then provided updates on HCAI's behavioral health programs since April 2023. HCAI is working on the application cycles for the Psychiatric Education Capacity Expansion (PECE) Grant Program, Social Work Education Capacity Expansion (SWCE) Program, and Peer Personnel Programs which are anticipated to be released in January 2024. HCAI's new scholarship programs, the Golden State Social Opportunities Program and Behavioral Health Scholarship Program, launched application cycles in May 2023 and close on August 15, 2023. The Health Professions Career Opportunity Program (HPCOP), which includes the Health Careers Exploration Program and Health Professions Pathway Program, will anticipate application cycles to open on August 15, 2023. HCAI is currently developing a Loan Repayment Program for the Department of State Hospitals (DSH) specifically for Psychiatrics to award up to \$300,000 of relief for psychiatrists who agree to a five-year service obligation to work at DSH. HCAI is also developing a wellness coach program which will be funded by the Children and Youth Behavioral Health Initiative (CYBHI) to implement statewide trainings that will provide certificate and integrate wellness coaches in a wide variety of settings such as schools and community-based organizations.

Upon conclusion of the update, the committee engaged the presenters in Q & A which included topics such as the overlap of the Community Health Workers certification and Peer Support Specialist Certification, identification of wellness coach qualifications and services, and advocacy for a loan repayment and scholarship program for Occupational Therapists working in the behavioral health sector. Jessica Grove stated it would be helpful to know which entities provide remote training as the Department of Rehabilitation may support individuals interested in pursuing training pathways and fund them where the full cost is not met for scholarships and loan forgiveness.

WET Steering Committee member, Marcellus Brookshaw from Mental Health America California, stated that his organization has a Medi-Cal Peer Support Specialist Certification training and asked how many scholarships would be applicable for this training. Additionally, Marcellus asked what the requirements are for students who are eligible for the grants. Michael Andrijich stated that the Behavioral Health Scholarship Program would be more applicable and there is potentially enough funding for a maximum of 1,200 students. The main requirements state that the student must be enrolled in at least 6 semester units, maintain a 2.0 GPA, and attend an eligible educational institution in California.

#### **Action/Resolution**

The WEC will invite HCAI representatives to subsequent meetings to provide updates.

## **Responsible for Action-Due Date**

Ashneek Nanua, Vera Calloway – June 2023

#### **Public Comment** Item #4

Tanya Ri'Chard asked if online programs outside of California are eligible. Michael stated that they are not eligible for the Behavioral Health Scholarship Program.

Bill Stewart asked how many qualified colleges and programs exist in the state. Michael Andrijich stated that he did not know an exact number, but it can be a training institution, University of California system, and California State University System.

## Action/Resolution

N/A

**Responsible for Action-Due Date** 

N/A

#### Item #5 Medi-Cal Peer Support Specialist Certification Updates

Lucero Robles, Director of Quality Assurance and Compliance for the California Mental Health Services Authority (CalMHSA), and Alexandria Simpson from the Medi-Cal Behavioral Health Policy Division at the Department of Health Care Services (DHCS) presented updates on the Medi-Cal Peer Support Specialist Certification Benefit followed by a Q & A session with committee members. Alexandria Simpson shared Medi-Cal Peer Support Specialist updates from DHCS including guidance updates including Behavioral Health Information Notice 23-012 (fee schedule) and FAQs, information about the National Provider Identifier (NPI), newly approved areas of specialization, and implementation monitoring. The draft guidance for Peer Support Specialist Implementation will be updated to clarify existing guidance and released for stakeholder comment in Summer 2023. DHCS is finalizing guidance for the NPI which will be available for stakeholder comments prior to finalization. For areas of specialization, DHCS approved curricula for peers working with unhoused individuals, justice-involved, and individuals in crisis. An optional survey will be administered to counties to assess peer certification implementation related to the CalAIM program.

Lucero Robles reviewed the roles of CalMHSA as the certifying entity and then shared an updated data snapshot of applicants for certification including demographics of applicants and approved certified individuals by employment status, age, race/ethnicity, language, geographic distribution by county and region, and lived experience. CalMHSA received 3,800 applications for certification as of May 2023 and 1,031 individuals have been certified. CalMHSA also awarded approximately 2,200 scholarships for the initial certification pathway and approximately 1,300 scholarships for the grandparenting pathway. There are still scholarships available for initial and grandparenting certification as well as the parent/caregiver/family member specialization. Lucero shared that there are now 22 approved training providers for the core competencies and CalMHSA has

received an additional 6 applications to add new training providers. There are 5 training providers approved for the parent and caregiver specialization. For areas of specialization, CalMHSA has reviewed Request for Proposals (RFPs) and notified awardees. CalMHSA is currently completing contracts with the RFP awardees.

Committee members engaged presenters in a Q & A session regarding data on race/ethnicity and language considerations of all potential applicants for more inclusivity, shared concerns about the length of the Peer Support Specialist Certification training and ensuring non-certified peers have a place in the workforce, expressed interest in data indicating whether there is an increase in wages by race/ethnicity after an individual is certified, and advocated for outreach and tracking of demographics for the LGBTQ community.

#### **Action/Resolution**

The WEC will continue to track and provide input for Senate Bill 803 implementation.

# **Responsible for Action-Due Date**

Ashneek Nanua, Vera Calloway - Ongoing

Item #6 Public Comment

Bill Stewart, Vice President of the California Local Behavioral Health Boards and Commissions (CalBHBC) and Chair for San Diego County Board, stated that the California workforce demographics show less Asian American and African American professionals and CalMHSA's data showed similar patterns. Bill asked CalMHSA to look at this data because peers have the opportunity to make individuals feel comfortable to enter services and align with workforce diversity efforts. Bill commented that the scholarship statistics were skewed towards the awardees for the grandparenting pathway, and it would be easier for those who are grandparented to go through testing. He asked if there were other possible ways to promote scholarships to individuals who are not grandparented into certification. Lucero Robles stated that there are an equal number of scholarships for the initial pathway and for the grandparenting pathway.

Stephanie Ramos, Cal Voices and California Association of Peer Professionals, asked if the grandparenting scholarships will transfer to the scholarship pool for the initial pathway and if there are efforts to expand certification for the private sector and non-county contracted community-based organizations (CBOs) serving underserved communities, Black Indigenous People of Color (BIPOC) communities, and LGBTQ communities. Lucero Robles confirmed that the grandparenting scholarships will transfer to the scholarship pool for the initial pathway. Alexandria Simpson stated that DHCS has heard that it is been difficult for CBOs who do not contract traditionally with

counties and are exploring ways to build capacity for these CBOs and understand more about what the challenges are.

**Action/Resolution** 

N/A

**Responsible for Action-Due Date** 

N/A

# Item #7 Planning of Medi-Cal Peer Support Specialist Certification Paper

Vera Calloway, Chairperson, initiated committee discussion for the WEC to assemble a white paper on Medi-Cal Peer Support Specialist Certification. She asked committee members if there is interest to do so and what elements they would like to see included in the paper. Committee members discussed whether there is a need to create a document if there are other entities evaluating implementation, but it would be helpful for CBHPC to focus on the incomplete and unfinished implementation of peer certification and create recommendations. This would entail telling the story of what happened, how it happened, and identify gaps of how incomplete the current certification is from the original vision of peer support. Committee members discussed the need to identify who the intended audience would be for the white paper. Other considerations included not having adequate information about employment and impact of peer certification on career mobility or increase salaries, as well as concerns with the trainings not being individually tailored towards the learner. Due to the lack of information of implementation at this time, the WEC will defer the development of the paper.

#### Action/Resolution

The WEC will pursue the creation of a Medi-Cal Peer Support Specialist Certification white paper once there is more information available on implementation efforts.

### **Responsible for Action-Due Date**

Ashneek Nanua, Vera Calloway - Ongoing

#### Item #8 Public Comment

Elizabeth R. Stone stated the importance of collecting salient and valuable data points as the current data points are vague. She expressed the difficulty in discerning if earnings are lower depending on whether people are working part-time or full-time and how to accommodate individuals who want to remain on SSI and SSDI as well as the peer choice to work part-time. Another issue of concern is that peer-run organizations

that had long-term contracts lost their contracts, and those services were then placed under clinical providers. Peer-run and peer-directed organizations outside of a clinical framework are having substantial challenges with county approvals to bill Medi-Cal. Elizabeth suggested to have a data point on the work environment in which peers are employed when looking at the impact of certification. Additionally, Elizabeth expressed the benefits of having an individualized curriculum and asked to consider how to transmit and ensure the fidelity of the peer model. Elizabeth also expressed feelings of disappointment that the early versions of the CARE Act that had the leverage to force counties to offer the services that people wanted if residential services were available were removed from the Act.

Action/Resolution
N/A
Responsible for Action-Due Date
N/A

Item #9 Los Angeles Regional Initiative for Social Enterprise (LA:RISE) Presentation

Reena De Asis, Senior Manager of Government Partnerships and Policy, REDF, presented an overview on the Los Angeles Regional Initiative for Social Enterprise (LA:RISE), a private-public partnership model for social enterprise in the City and County of Los Angeles. The Economic and Workforce Development Department in the City of Los Angeles is the funder for social enterprises in the city and the Department of Economic Opportunity is the funder and partner for the county. Both departments partner with REDF to administer the social enterprise employment model. In the LA:RISE program model, eligible individuals receive 300 hours of paid transitional work experience, supportive employment services, job readiness, competitive employment, and retention services. Eligibility is based on Los Angeles City or County residence and individuals at risk of homelessness. Strengths of the program include co-location and co-casement of services, integrated case management system, wraparound services, and resources provided. Challenges include lack of staff capacity, linkages to housing and lack of affordable housing, and training in trauma-informed care.

Joe Altepeter, Chief Social Enterprise Officer of Downtown Women's Center (DWC), presented on the DWC which is one of the organizations participating in LA:RISE. The DWC provides permanent supportive housing and wraparound services through housing, wellness, employment, and advocacy. Wraparound services include case management, medical and mental health services, occupational therapy, employment, and education. DWC has three social enterprise programs to support women who are homeless or at-risk of homelessness, justice-involved, experience mental health and

substance use issues, intimate partner violence, and generational poverty with gaining and maintaining employment. The program includes transitional jobs through LA:RISE and permanent jobs at DWC once they complete transitional employment. There is a 70% completion rate for transition employment, 70% competitive employment rate after completion of transitional employment services, and 68% retention rate after 6 months of gaining employment. Employment services one-on-one coaching and workshops on resume writing, mock interviews, computer and financial literacy, career planning, and public speaking. DWC partners with various workforce centers to provide supportive job search and training as well.

Q & A topics included the longevity and challenges of tracking retention rate in the long-term, potential barriers and opportunities to work with B Corporations for public-private partnerships, and the need for more permanent employment opportunities and alternatives to employment for individuals with psychiatric disabilities.

#### **Action/Resolution**

N/A

**Responsible for Action-Due Date** 

N/A

# Item #10 Public Comment

Elizabeth R. Stone asked for copies of the presentation slides. Reena De Asis provided Elizabeth with the various avenues to seek resources shared during the presentation.

### **Action/Resolution**

N/A

**Responsible for Action-Due Date** 

N/A

### Item #11 Update WEC Work Plan for 2023-2024

The committee reviewed and provided comments for the WEC 2022-23 Work Plan. Chairperson Vera Calloway asked the committee to prioritize topics and consider items to consolidate. Committee members made the following comments and key points:

- Explore self-employment in creative spaces and gig work for individuals with psychiatric disabilities when evaluating employment models.
- Consider holding a 2-3 hour listening session, workshop, or event to invite representatives from each employment model including entrepreneurs to provide

- a perspective on the community needs as well as the benefits and challenges of each employment model.
- Identify data that shows the gaps of the hard-to-fill behavioral health professions on a statewide level which may include information about local partnerships providing education and training opportunities.
- Identify successful employment programs at the local level, where they are located, strengthen the connections between the people who need employment services to these available programs and services, and scale the programs to hard-to-reach areas.
- Consider adding recommendations from the County Behavioral Health Directors
  Association's Workforce Needs Assessment Report (Page 12) that align with
  inter-agency partnerships, such as training for new individuals into the workforce
  or clinical training extended into the workplace which lessens the financial burden
  for agencies to furnish this expense themselves.

#### Action/Resolution

The WEC will continue having conversations to update the committee Work Plan and determine if the committee will have an in-between meeting prior to October.

# Responsible for Action-Due Date

Vera Calloway, Ashneek Nanua – October 2023

# Item #12 Public Comment

Chad Costello stated that workforce data is available. One of the things seen in the behavioral health workforce space is a necessitated reporting mechanism when Mental Health Services Act (MHSA) funds were allocated for workforce, education, and training (WET), however, workforce funding has since broadened so we are now looking at it statewide. The state is proposing to have \$36 million of MHSA money to draw down approximately \$400 million in federal match funds for employment through the 1115 Demonstration Waiver. Chad stated that the workforce problem has now expanded beyond the scope of the WEC, and the committee's job is to direct, bring in information, and have some say in money provided in the public behavioral health system.

Theresa Comstock, CA Local Behavioral Health Boards and Commissions (CalBHBC), stated that she forwarded WEC staff a recent report conducted by the CA Alliance of Child and Family Services and a 10-Year Strategic Workforce Plan report by the County Behavioral Health Directors Association containing workforce needs assessments. Theresa encouraged the committee to add their voices to these efforts and develop recommendations using the reports to inform HCAI's WET Plan as well as provide recommendations to DHCS, the Department of Rehabilitation (DOR), and the Legislature. Theresa stated that the WEC may have an opportunity to work with the

Performance Outcomes Committee to gather data from the 59 boards and commissions on the performance of services regarding employment offerings with a focus on performance outcomes.

Elizabeth R. Stone stated it can be helpful to look at the changes in CalAIM and other major behavioral health transformation initiatives as DHCS is looking to fund Clubhouses and address social determinants of health in the 1115 Waiver. Elizabeth also recommended adding trauma-informed language in Strategic Goal 1.0 and 2.0 in addition to the current language of recovery-oriented workforce. Additionally, Elizabeth spoke on the training of licensed professions not understanding peers and their values and trauma-oriented recovery practices for care so it can be helpful to look at curricula and exams to prepare licensed providers.

Stephanie Ramos, Cal Voices and CA Association of Peer Professionals, encouraged the WEC to advocate for parity, wages, and access to opportunities between Peer Support Specialists, wellness coaches, and Community Health Workers as there is overlap between these professions. Stephanie asked the WEC to look at the research of why there is not as much Black, Indigenous, and People of Color (BIPOC) in behavioral health professions and their barriers prior to entering college.

#### Action/Resolution

N/A

**Responsible for Action-Due Date** 

N/A

# Item #13 Wrap Up/Next Steps

Vera Calloway proposed holding an in-between meeting to continue refining the WEC 2022-2023 Work Plan.

#### Action/Resolution

WEC staff will work with the WEC Officer team to determine next steps for the October 2023 Quarterly Meeting and potentially schedule an in-between meeting to update the committee Work Plan.

### **Responsible for Action-Due Date**

Ashneek Nanua, Vera Calloway – October 2023